_	Under the Paper	rwork Reducti	on Act of 1995, no	Dersons ar	e required to r	U.S. Pate	nt and T	Appro	wed for use the k Office; U.S.	rough I	PTC 0/31/2002. C RTMENT OF	0/SB/06 (08-0) MB 0651-003 F COMMERC		
	U.S. Para Under the Progressive Reduction Act of 1995, so detroop are required to remond to a collec- PATENT APPLICATION FEE DETERMINATION RECOIL								Application of Destroy					
CLAIMS AS FILED - PART I									OTHER THAN					
(Column 1) (Column 2)							. s	MALL	ENTITY	OR				
FOR			NUMBERFILED		NUMBEREXTRA		l٢	RATE	FEE	1	RATE	PEE		
BASIC FEE (JTCFR 1.160)) TOTAL CL'AIMS				W 42	4375			s	OR		s <u>750</u>			
(JYCFR 1.16(c)) INDEPENDENT CLAIMS		2	mi	nus 20 =	. 0	x \$=		OR	x s_18	0				
(37CFR 1.16(b))		1		inus 3 =	0					OR	x <u>84</u> =	0		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16)					(d))		1			OR	+ 0 -	0		
* If the difference in column 1 is less then zero, enter *0* in column 2						7	TOTAL		OR	TOTAL	750			
6	6/24/03 CLAIMS AS AMENDED - PART II (Column 1)						s	MALL	ENTITY	OR	OTHER T			
AMENDMENT A	i de la companya de	CLAIM REMAIN AFTER AMENDM	ING	PRE	GHEST IMBER VIOUSLY ID FOR	PRESENT EXTRA	$\prod_{i}$	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total (37CFR 1.16(e))	. 2	Minus		20-	-	١,,	9=	1	OR	xs <u>/P</u> _	1		
	Independent (37 CFR 1.16(b))	• /	Minus	•••	3	-	11.	42 =		OR	.84.			
		SENTATION	OF MULTIPLE D	EPENDE	TCLAIM	(37CFR 1.166))	۱F.	140 =		OR OR	-280_			
	9/3/03 (column 1) (Column 2) (Column 3)						ADDI	OTAL T. FEE		OR	TOTAL DDIT.FEE			
AMENDMENT B		CLAIM REMAIN AFTER AMENDM	ING L	PRE	HEST MBER MOUSLY D FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total (37 CFR 1.16(c))	. 30	Minus	- 3	20	- 10	x S_	9_		OR	xs <i>18-</i>	18000		
	Independent (37CFR 1.16(b))	• 3	Minus	••• ,	3	-	x_	42 =		OR OR	.84 -			
		ENTATION	OFMULTIPLEDE	PENDEN	TCLAIM	(37 CFR 1.16(d)) +		40=		OR	+280 -			
2   22/05 (column i) (Column 2) (Column 3					(Column 3)		TOTAL IT. FEE		OR	TOTAL DIT. FEE				
AMENDMENT C		CLAIM: REMAINI AFTER AMENDMI	NG	NU PREV	HEST MBER TOUSLY D FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total (27 CFR 1.16(c))	. 26	Minus		30	4	x \$9	<u> 25 =</u>	1	OR	s <u>50</u>	.1		
	Independent (37 CFR 1.16(b))	• 3	Minus		3	-	× /	10 =	$\neg \neg$	OR OR	200=	$\sqcap$		
۲	FIRST PRESENTATION OF MULTIPLE DEP			PENDEN	TCLAIM	(37CFR 1.16(d))	+1	80 =		OR	360 =	$\top$		
* If the entry in column I is less than the entry in column 2, write *0* in column 3. ** If the *Highes Number Previously Paid For* IN THIS SPACE is less than 20, enter *20*.  ADDIT. FEE  ADDIT. FEE												=		
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.  Burdan Hour Statement: This form is estimated to take 02 hours to complete. Then will very depending upon the needs of the individual case.												-		

ources nour attended: I had from it estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.
Any comments on the amount of time you are required to complete this from should be sent to the Chief Information Office, U.S. Patent and Trademac Office, Washington, DC 20231, DO NOT SEND FEES DR COMPLETED FORMS TD THIS ADDRESS. SEND TO: Astinstat Commissioner for Parent Washington, DC 20231.